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ABSTRACT

This fact sheet summarizes information on children who have an attention deficit disorder with hyperactivity (ADHD), are gifted, or are both ADHD and gifted. Fourteen diagnostic criteria for ADHD from the Diagnostic and Statistical Manual of Mental Disorders III are listed. A comparison of behaviors associated with ADHD and with giftedness is offered, noting the many similarities. Parents and teachers are urged to consider the situation and setting of problematic behaviors, noting that children with ADHD typically exhibit problem behaviors in all settings (both at home and at school) whereas gifted children are most likely to exhibit such behaviors in situations where they are bored or waiting for other students. Other differences noted include a long attention span (when interested) by gifted students and a greater variability in task performance by children with ADHD. Careful evaluation is urged for students who may be both gifted/talented and ADHD. (DB)

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ADHD and CHILDREN WHO ARE GIFTED

James T. Webb and Diane Latimer

Howard's teachers say he just isn't working up to his ability. He doesn't finish his assignments, or just puts down answers without showing his work; his handwriting and spelling are poor. He sits and fidgets in class, talks to others, and often disrupts class by interrupting others. He used to shout out the answers to the teachers' questions (they were usually right), but now he daydreams a lot and seems distracted. Does Howard have Attention Deficit Hyperactivity Disorder (ADHD), is he gifted, or both?

Frequently, bright children have been referred to psychologists or pediatricians because they exhibited certain behaviors (e.g., restlessness, inattention, impulsivity, high activity level, daydreaming) commonly associated with a diagnosis of ADHD. Formally, the Diagnostic and Statistical Manual of Mental Disorders (DSM-III-R) (American Psychiatric Association) lists 14 characteristics that may be found in children diagnosed as having ADHD. At least 8 of these characteristics must be present, the onset must be before age 7, and they must be present for at least six months.

DSM-III-R DIAGNOSTIC CRITERIA FOR ATTENTION-DEFICIT HYPERACTIVITY DISORDER*

1. Often fidgets with hands or feet or squirms in seat (in adolescents may be limited to subjective feelings of restlessness).
2. Has difficulty remaining seated when required to.
3. Is easily distracted by extraneous stimuli.
4. Has difficulty awaiting turns in games or group situations.
5. Often blurts out answers to questions before they have been completed.
6. Has difficulty following through on instructions from others (not due to oppositional behavior or failure of comprehension).
7. Has difficulty sustaining attention in tasks or play activities.
8. Often shifts from one uncompleted activity to another.
9. Has difficulty playing quietly.
10. Often talks excessively.
11. Often interrupts or intrudes on others, e.g., butts into other people's games.
12. Often does not seem to listen to what is being said to him or her.
13. Often loses things necessary for tasks or activities at school or at home (e.g., toys, pencils, books).
14. Often engages in physically dangerous activities without considering possible consequences (not for the purpose of thrill-seeking), e.g., runs into street without looking.

Almost all of these behaviors, however, might be found in bright, talented, creative, gifted children. Until now, little attention has been given to the similarities and differences between the two groups, thus raising the potential for misidentification in both areas—giftedness and ADHD.

Sometimes, professionals have diagnosed ADHD by simply listening to parent or teacher descriptions of the child's behaviors along with a brief observation of the child. Other times, brief screening questionnaires are used, although these questionnaires only quantify the parents' or teachers' descriptions of the behaviors (Parker, 1992). Children who are fortunate enough to have a thorough physical evaluation (which includes screening for allergies and other metabolic disorders) and extensive psychological evaluations, which include assessment of intelligence, achievement, and emotional status, have a better chance of being accurately identified. A child may be gifted *and* have ADHD. Without a thorough professional evaluation, it is difficult to tell.

How Can Parents or Teachers Distinguish Between ADHD and Giftedness?

Seeing the difference between behaviors that are sometimes associated with giftedness but also characteristic of ADHD is not easy, as the following list shows.

Behaviors Associated with ADHD (Barkley, 1990)	Behaviors Associated with Giftedness (Webb, 1993)
• Poorly sustained attention in almost all situations	• Poor attention, boredom, daydreaming in specific situations
• Diminished persistence on tasks not having immediate consequences	• Low tolerance for persistence on tasks that seem irrelevant
• Impulsivity, poor delay of gratification	• Judgment lags behind development of intellect
• Impaired adherence to commands to regulate or inhibit behavior in social contexts	• Intensity may lead to power struggles with authorities
• More active, restless than normal children	• High activity level; may need less sleep
• Difficulty adhering to rules and regulations	• Questions rules, customs and traditions

Consider the Situation and Setting

It is important to examine the situations in which a child's behaviors are problematic. Gifted children typically do not exhibit problems in all situations. For example, they may be seen as

*Note. Reprinted with permission from the *Diagnostic and Statistical Manual of Mental Disorders, Third Edition, Revised*, Washington, DC, American Psychiatric Association, 1987.

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ADHD-like by one classroom teacher, but not by another; or they may be seen as ADHD at school, but not by the scout leader or music teacher. Close examination of the troublesome situation generally reveals other factors which are prompting the problem behaviors. By contrast, children with ADHD typically exhibit the problem behaviors in virtually all settings—including at home and at school—though the extent of their problem behaviors may fluctuate significantly from setting to setting (Barkley, 1990), depending largely on the structure of that situation. That is, the behaviors exist in all settings, but are more of a problem in some settings than in others.

In the classroom, a gifted child's perceived inability to stay on task is likely to be related to boredom, curriculum, mismatched learning style, or other environmental factors. Gifted children may spend from one-fourth to one-half of their regular classroom time waiting for others to catch up—even more if they are in a heterogeneously grouped class. Their specific level of academic achievement is often two to four grade levels above their actual grade placement. Such children often respond to non-challenging or slow-moving classroom situations by "off-task" behavior, disruptions, or other attempts at self-amusement. This use of extra time is often the cause of the referral for an ADHD evaluation.

Hyperactive is a word often used to describe gifted children as well as children with ADHD. As with attention span, children with ADHD have a high activity level, but this activity level is often found across situations (Barkley, 1990). A large proportion of gifted children are highly active too. As many as one-fourth may require less sleep; however, their activity is generally focused and directed (Clark, 1992; Webb, Meckstroth, & Tolan, 1982), in contrast to the behavior of children with ADHD. The intensity of gifted children's concentration often permits them to spend long periods of time and much energy focusing on whatever truly interests them. Their specific interests may not coincide, however, with the desires and expectations of teachers or parents.

While the child who is hyperactive has a very brief attention span in virtually every situation (usually except for television or computer games), children who are gifted can concentrate comfortably for long periods on tasks that interest them, and do not require immediate completion of those tasks or immediate consequences. The activities of children with ADHD tend to be both continual and random; the gifted child's activity usually is episodic and directed to specific goals.

While difficulties and adherence to rules and regulations has only begun to be accepted as a sign of ADHD (Barkley, 1990), gifted children may actively question rules, customs and traditions, sometimes creating complex rules which they expect others to respect or obey. Some engage in power struggles. These behaviors can cause discomfort for parents, teachers, and peers.

One characteristic of ADHD that does not have a counterpart in children who are gifted is variability of task performance. In almost every setting, children with ADHD tend to be highly inconsistent in the quality of their performance (i.e., grades, chores) and the amount of time used to accomplish tasks (Barkley, 1990). Children who are gifted routinely maintain consistent efforts and high grades in classes when they like the teacher and are intellectually challenged, although they may resist some aspects of the work, particularly repetition of tasks perceived as dull. Some gifted children may become intensely focused and determined (an aspect of their intensity) to produce a product that meets their self-imposed standards.

What Teachers and Parents Can Do

Determining whether a child has ADHD can be particularly difficult when that child is also gifted. The use of many instruments, including intelligence tests administered by qualified professionals, achievement and personality tests, as well as parent and teacher rating scales, can help the professional determine the subtle differences between ADHD and giftedness. Individual evaluation allows the professional to establish maximum rapport with the child to get the best effort on the tests. Since the test situation is constant, it is possible to make better comparisons among children. Portions of the intellectual and achievement tests will reveal attention problems or learning disabilities, whereas personality tests are designed to show whether emotional problems (e.g., depression or anxiety) could be causing the problem behaviors. Evaluation should be followed by appropriate curricular and instructional modifications that account for advanced knowledge, diverse learning styles, and various types of intelligence.

Careful consideration and appropriate professional evaluation are necessary before concluding that bright, creative, intense youngsters like Howard have ADHD. Consider the characteristics of the gifted/talented child and the child's situation. Do not hesitate to raise the possibility of giftedness with any professional who is evaluating the child for ADHD; however, do not be surprised if the professional has had little training in recognizing the characteristics of gifted/talented children (Webb, 1993). It is important to make the correct diagnosis, and parents and teachers may need to provide information to others since giftedness is often neglected in professional development programs.

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